# UNITED STATES DISTRICT COURT for the District of Division 3.25-04-0195 Case No. Manlyn Stuga (Write the full name of each plaintiff who is filing this complaint. Jury Trial: (check one) If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) Steve Smith DBA Ed Kiel Polk Honky Tunk Noshvolle Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) COMPLAINT FOR EMPLOYMENT DISCRIMINATION I. The Parties to This Complaint A. The Plaintiff(s) Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed. Name Street Address

#### B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Antioch, Thi - Davidson

marilyn\_Scruggs Qyahos, com

City and County

State and Zip Code Telephone Number E-mail Address

Defendant No. 1	Steve Smith DBA Nashville
Name	Kid ROCK HONRY TONK LOCK NOW MS
Job or Title (if known)	NIA
Street Address	221 Broadway
City and County	Nashville Davidson
State and Zip Code	The 37201
Telephone Number	615-248-2706
E-mail Address (if known)	
Defendant No. 2	
Name	Chris Skully
Job or Title (if known)	Heneral Manager
Street Address	221 Broadway
City and County	Norshille Davidson
State and Zip Code	TM 37201
Telephone Number	615-248-2706
E-mail Address (if known)	
Defendant No. 3	
Name	Hannah Polk
Job or Title (if known)	Sener Manager
Street Address	221 Broadway
City and County	Nashnile Davidson
State and Zip Code	TAI 372-01
Telephone Number	615-248-2706
E-mail Address (if known)	
Defendant No. 4	
Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	

## C. Place of Employment

The address at which I sought employment or was employed by the defendant(s) is

Name	Kid Rocks Big Ass Honky Tonk
Street Address	221 Broadway
City and County	Nashville Davidson
State and Zip Code	The 37201
Telephone Number	615-248-2-706

### II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to (check all that apply):

Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).
(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.
(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)
Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.
(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
Other federal law (specify the federal law):
Relevant state law (specify, if known):
Relevant city or county law (specify, if known):

#### III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A.	The discrimina	atory conduct of which I complain in this action includes (check all that apply):
		Failure to hire me.
		Termination of my employment.
		Failure to promote me.
		Failure to accommodate my disability.
		Unequal terms and conditions of my employment.
		Retaliation.
		Other acts (specify):
		(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)
В.	It is my best re	ecollection that the alleged discriminatory acts occurred on date(s)
	May 3	0,2024 - July 5,2024
C.	I believe that o	defendant(s) (check one):
		is/are still committing these acts against me.
		is/are not still committing these acts against me.
D.	Defendant(s) (	liscriminated against me based on my (check all that apply and explain):
Δ.		race
		color
	Ħ	gender/sex
	Ħ	religion
	一	national origin
	一	age (year of birth) (only when asserting a claim of age discrimination.)
		disability or perceived disability (specify disability)
E.	THIS MY H	y case are as follows. Attach additional pages if needed. scheets that my rights protected under the Civil Rights Ret of Iquey were wolded i'm asking to be awarded 860,000.
	Case 3:25-cv-0	ve damages, I'm requesting the amount of 130,000. Page 4 of 6 Page 1 Page 4 of 6

During my employment, I was prevented from working certain shifts.

Due to seniority however, there were no trenured minorities. I was terminated with no just cause. After I was let go non-minority people were hired. I believe I was let go due to me being a black women of deep complexion. Throughout my employment, I was given a seperate dress code from the rest of the staff due to my anatomy.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

#### IV. Exhaustion of Federal Administrative Remedies

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It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or A. my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

0/108/3009
The Equal Employment Opportunity Commission (check one):
has not issued a Notice of Right to Sue letter.
issued a Notice of Right to Sue letter, which I received on (date) 12/06/2024
(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)
Only litigants alleging age discrimination must answer this question.
Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):
60 days or more have elapsed.  less than 60 days have elapsed.

#### V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

## VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: $2/21/25$
	Signature of Plaintiff  Mariy 18
	Printed Name of Plaintiff Manilyn D. Scruggs
В.	For Attorneys
	Date of signing:
	Signature of Attorney
	Printed Name of Attorney
	Bar Number
	Name of Law Firm
	Street Address
	State and Zip Code
	Telephone Number
	E-mail Address